


[#YALICHATs - A Year In Review](#)

Since the first #YALICHAT in March 2014, the YALI Network has connected members with experts in a variety of fields to talk about issues that are important to their continuing education and awareness. The #YALICHATs provide an opportunity to engage on timely and interesting subjects — to hear stories, ask questions, get answers and real-world advice from experts, and hopefully, feel inspired and encouraged. We've collected the history of #YALICHATs [here](#), and what follows are the highlights from our first twelve months.

The Twitter and Facebook #YALICHATs have covered a range of topics, from U.S. government policy to entrepreneurship, leadership, civic engagement and the devastating effects of Ebola. Click on the embedded links below to revisit these chats.

The first live online engagement with the newly formed [Young African Leaders Initiative Network](#) featured three senior officials at the U.S. Department of State: [Under Secretary for Public Diplomacy and Public Affairs Richard Stengel](#); [Evan Ryan, assistant secretary, Bureau of Educational and Cultural Affairs](#); and [Macon Phillips, coordinator, Bureau of International Information Programs](#). Questions focused on education, entrepreneurship, agriculture, trade and the 2014 Mandela Washington Fellowship.

U.S. Secretary of State John Kerry 
Twitter Chat with the YALI Network

In May, [Secretary of State John Kerry](#) held a Twitter chat with the YALI Network. The secretary answered questions on his travels in Africa, peace and security, economic growth, Boko Haram and his hopes for African youth. His advice to the YALI Network: “Be inquisitive. Learn as much as possible. Never give up. Call it like it is. Perseverance.” Other government leaders who engaged with the YALI Network included [U.S. Senator Christopher Coons](#) from Delaware, who as a young man lived and worked in Africa, and [Special Assistant to the President and Senior Director for African Affairs Grant Harris](#), who received over 2,000 tweets from the Network in just one hour.

Encouraging new entrepreneurship — both for commercial development and the social good — is one of the primary goals of the YALI Network, and there were several chats with successful business and social entrepreneurs. Fahad Hassan, social entrepreneur and CEO of @AlwaysPrepped, joined U.S. Department of State Special Adviser for Global Youth Issues Zeenat Rahman to talk about [launching a business that addresses societal needs](#). When asked for a key challenge facing African social entrepreneurs, Fahad said “immediate success.” He encouraged the YALI Network to “have patience and understand big problems take a long time to solve.” Other #YALICHAT speakers on entrepreneurship included Professor [Michael Goldberg](#) and [Sheena Lindahl](#), co-founder and CEO of Empact.

Leadership is another key focus for the YALI Network. To commemorate the 2014 FIFA World Cup, the YALI Network engaged with three former athletes who've made the successful transition from player to leadership roles. Former NBA player and current NBA global ambassador [Dikembe Mutombo](#), Olympian and U.S. women's national soccer team alum [Mary Harvey](#), and former NFL linebacker and current Illinois state Senator [Napoleon Harris](#) engaged with the YALI Network on

what it takes to establish oneself in a leadership role. Congolese native Mutombo signed off his #YALICHAT with this wish: "My hope is that the Africa of my ancestors will be totally different than the Africa of my descendants. You will be part of that journey."

August and December featured #YALICHATs on Ebola. The first was held with officials from the [U.S. Centers for Disease Control and Prevention](#). Questions from the YALI Network focused on the origins of the outbreak, plans for controlling its spread and caring for the sick. [Saran Kaba Jones](#), a Liberian American, chatted with the YALI Network about her current efforts to bring safe water and hygiene to rural Africa. She described how communities are coming together to support the healed victims of the disease, many of whom are facing misunderstanding and stigmatization when they return to their homes.

The business of farming is a topic that many YALI Network members have expressed a strong interest in. As part of January's focus on agriculture, one #YALICHAT featured [Madison Ayer](#), CEO of Honeycare Africa and executive chairman of Farm Shop. Ayer provided guidance to YALI Network members on establishing and maintaining smallholder farms, logistics and distribution, product-market fit, and adapting to modern farming methods.

Democracy, good governance, and citizen responsibility were the focus of two #YALICHATs held in February, 2015. The first was with [Chris Spence](#), chief technology officer at the National Democratic Institute (NDI). NDI is a nonpartisan organization that works to strengthen democratic institutions worldwide and encourages citizen participation, openness, and accountability in government. The second #YALICHAT featured one of the very first chat participants, [Macon Phillips](#). Macon was joined by two 2014 Mandela Washington Fellows, Sobel Ngom and Chedi Ngulu. This special live #YALICHAT centered on engaging youth in the democratic process and developing resources and tools to encourage citizen involvement in government.

Many more chats on these and other interesting subjects are on the calendar in 2015. Stay connected with the YALI Network through [Facebook](#) and [Twitter](#) to learn about future #YALICHATs.

[Africa's Youth Must Take Up Challenge to Develop Africa](#)

YALI Network Member Collins Mabinda recent op-ed in [All Africa](#):

Recently, I joined a network of young Africans who are each working in a myriad of ways to develop the continent. I joined the Young African Leaders Initiative Network, which is an initiative of the United States government and African countries. The initiative seeks to promote a peaceful, stable, and prosperous Africa that is open for business, entrepreneurship, and civic opportunities.

Each of the YALI network members has pledged to help develop Africa in their own little way.

Among the YALI network members, there is a flourishing farmer in Morogoro, Tanzania, a civic leader in Lagos, Nigeria who is fighting against malaria in a sprawling slum in Lagos, and a Zimbabwean entrepreneur who founded the first innovation hub in Zimbabwe, Hypercube. Some of the YALI network members will be chosen to become Mandela Fellows, which will see them attend leading institutions in the United States for eight weeks. An additional small group will stay behind and be offered internship opportunities in leading companies in the US. Ultimately, the fellowship will culminate in a Presidential Summit with US President Barrack Obama.

The partnership between the United States and Africa is now informed by the fact that Africa has to move from the periphery of world affairs, and move to the centre, where it becomes part and parcel of the global conversation.

This is an Africa that will be known for its opportunities and will be at the desk of policymakers in the White House, London, and other global capitals is what we seek as YALI network members.

Evidently, not all of us will be selected to become Mandela Fellows. However, I urge even those who will not be selected to become Mandela Fellows to continue engaging in the various networking opportunities, and work to build Africa one step at a time. One day, their efforts will be rewarded, and they will get other opportunities to showcase their talents.


Moreover, as young Africans, it is our duty to ensure that we create a new narrative for Africa. Africa is on the brink of takeoff, never mind a few instabilities here and there. It would be a tragedy if outsiders see Africa's potential, but Africans don't see this potential.

Sharing Ideas and Cooperation

Members of the YALI Network are working in their communities to improve health awareness. Alport Ndebele is a YALI member who describes his work as a peer educator. He leads youth programs on reproductive health in communities in the Matabeleland region of Zimbabwe.

I lead a team of youth leaders under the National AIDS Council of Zimbabwe. I operate in Bulawayo urban and rural districts, running programs and activities that have a sole goal of bringing innovation through involvement and volunteerism.

This is a community that is short on education, information and communication of all sorts. We want to try to cover that gap by bringing in social activities where we disseminate and discuss health information.

Alport Ndebele conducts a health  education program for a group of young

people in Umguza District, Matabeleland
North province, Zimbabwe.

We trained a total of 20 peer educators with communication and public speaking skills, and have boosted their esteem and confidence in doing so. They stand before their peers and educate each other on sensitive issues such as sexual reproductive health, a topic never discussed in some families. We have held events like sports galas and quiz competitions that have attracted over 200 youths per event in rural settings.

We now even have clubs formed at the village level that meet on a weekly basis and continue to share ideas and cooperation for the betterment of their community.

My membership in the YALI Network is helping me learn more about other related activities and policies relating to social development and improvement of my community. Most of all, I, myself, gain inspiration from resources being shared in this network.

Can the YALI Network create social exchange programs for youths to meet, share and exchange ideas with other youth leaders from different parts of the world with common goals? It is possible to move a mountain by shovelling pebbles off its base. I believe in humble beginnings, hence YALI might just be a space that will benefit my group.

Alport Ndebele conducts health education programs in Zimbabwe, affiliated with a nongovernmental organization called Hope for a Child in Christ.

African Community, Traditions Can Support Better Mental Health Treatment

“Mental health is an issue that affects Africans daily. More distressing is the fact that there is so much stigma and superstition attached to it that it is an area that continues to hold the continent’s public health sector back.”- Ida Mboob, 2014 Mandela Washington Fellow, The Gambia

Community resources to promote mental health and treat mental illness are scarce in Africa, as they are in most developing world countries. With professional resources limited, it’s important for individuals to recognize the possible signs of mental health issues in their friends and families, according to Mandela Washington 2014 Fellow Harriet Yayra Adzofu.

“I tell families to look out for withdrawal from social activities that were previously enjoyed by the person. For example, loss of interest in school, work or sporting activities.”

A psychiatric nurse at the Accra Psychiatric Hospital, Harriet works directly with people suffering from mental disorders and their relatives. She offers some practical advice to the YALI Network about how to spot the danger signs for mental illness in a family member:

- Change in sleep or eating habits.
- Complaints of unexplained physical ailments, such as fever, headache, abdominal discomfort, etc.
- Social isolation.
- Unusual fear, anxiety, irritability or restlessness.
- Complaints of low energy or fatigue.
- Talking to one's self.
- Unrealistic beliefs about one's social status or capabilities. For instance, a student suddenly says he is the president.
- Neglect of personal hygiene.
- Long periods of over excitement or sadness.
- Thoughts of death or suicide.
- Complaints of hearing voices or seeing visions.
- Substance abuse.
- Confusion or lack of concentration.

Harriet also works in the community in mental illness prevention, treatment and rehabilitation. She also works to to empower people in her community to live healthy lifestyles.

Besides the support and understanding that caring family members can provide, other social qualities and communal traditions inherent to African cultures are potential resources to help people with mental health problems, according to a U.S. psychologist.

"Natural supports exist for a person through community or faith-based organizations, and the notion of shared responsibility for a person," said Paul Sachs. "African communities, particularly in smaller towns or villages ... are more attuned to this."

Sachs, a clinical psychologist, is with NHS Human Services of Philadelphia, Pennsylvania, an organization providing therapeutic care to patients with a variety of special needs. After a 2012 trip to Africa, he was a consultant in the establishment of a Ghanaian nongovernmental organization dedicated to addressing mental health issues. (See the For All Africa Foundation below.)

African storytelling traditions can be another important asset in addressing mental health issues, Sachs said. People who have experienced mental health disorders and treatment "have amazing stories to tell. Storytelling is a way that they can give their chaotic experiences greater coherence."

The United States and other developed countries have progressed in their understanding and sensitivity about mental health disorders, a process also underway in Africa, Sachs says. Nongovernmental organizations and volunteer counseling services are being organized in many countries. A brief guide to these services follows.

[For All Africa Foundation](#)

Africa Mental Health Foundation

International Association for Suicide Prevention

Befrienders Worldwide (volunteer action to prevent suicide)

Suicide.org

LifeLine South Africa

Important Facts About Mental Health

Facts About Mental Health

1. Mental health problems are common, estimated to affect as many as 1 in 4 people worldwide at some point in life.
2. Mental health problems are not an individual weakness or failure. Biological factors or life experiences can give rise to a disorder. Genetics, physical illness, injury, brain chemistry, trauma or a history of abuse can all be causal factors.
3. Mental illness is a disease, centered in the brain, involving cognition, emotion and a person's spiritual and physical being. Like other diseases, mental disorders can be treated, managed and even cured.
4. Mental illness is not a curse imposed by a higher power. It is not a form of possession by a malign spirit.
5. Abnormal thoughts, perceptions, emotions, behavior and relationships are among the general symptoms an individual suffers from with a mental illness.
6. Depression, bipolar affective disorder, schizophrenia and other psychoses, dementia, intellectual disabilities and developmental disorders, including autism, are all different forms of mental illness.
7. Mental and physical health are linked. Mental disorders are important risk factors for other diseases and injuries. Mental disorders can increase the risk of other diseases such as HIV, cardiovascular disease and diabetes.
8. Mental illness affects more than the individual. Family, friends, neighbors and associates can all be affected. Conversely, they can also be sources of support.
9. Medications have been a great help in the treatment of mental illness. Mentally ill people can learn new ways of managing their emotions to resume productive lives.
10. Health care, social services and community support are critical to treatment and management of a mental illness. Friends and loved ones are important in helping an individual manage a mental

illness.

Sources: <http://www.mentalhealth.gov/basics/myths-facts/>

http://www.who.int/features/factfiles/mental_health/en/


<http://www.who.int/mediacentre/factsheets/fs396/en/>

<http://www.nimh.nih.gov/health/index.shtml>

Promoting Good Health Through Community Education

“People do learn how to watch their diets.” — YALI Network member Ebelenna Anekwe

YALI Network member Ebelenna Anekwe is a volunteer peer educator who inspires neighbors in his Nigerian community to think more about how they can improve their health.

Ebelenna Anekwe checks a neighbor's  blood pressure.

He does that by teaching them about nutrition levels in the food they eat. He encourages them to get regular medical check-ups — including blood pressure and diabetes screenings — and to take their medicines and other treatments as prescribed. Since 2013, he has reached 100 people ranging from youth to the elderly.

Anekwe, 25, is a physical therapy student at the University of Maiduguri. Since 2009 he has volunteered with the nonprofit International Center for Advocacy on Right to Health, also known as Alliance Rights Nigeria. He began his work there by taking patients' vital signs, which indicate general physical health, give clues to possible diseases and show progress toward recovery. “My family works with me to make great change in our community,” he says.

“I believe peoples' attitudes have changed” about maintaining their health, he said. “People do learn how to watch their diets.”


Anekwe is helping to spread a message about cardiovascular disease that is sometimes overlooked in Africa, where infectious disease is frequently portrayed as the most immediate health threat. According to the U.S. Centers for Disease Control and Prevention, more people in the world die of heart disease and stroke than from any other cause. Heart disease and stroke risk factors include unhealthy diet and physical inactivity. Diabetes is a chronic disease that occurs when the pancreas does not produce enough insulin or when the body cannot use the insulin it produces. Diabetes

increases the risk of heart disease and stroke.

“Get Involved. Make a Difference!”

Screening for HIV, infection prevention and community involvement are among the best ways to contain and control the virus that causes AIDS. That’s the message a group of Mandela Washington Fellows heard earlier this year from an AIDS prevention group in the state of Delaware.

“Get Involved. Make a Difference!” is the call to action AIDS Delaware uses to bring volunteers into its organization to encourage people to get a free and confidential test for HIV, the virus that causes AIDS.

These YALI Network members met with  the nonprofit group AIDS Delaware to learn how the group provides services with the help of volunteers.

AIDS Delaware is one of many community groups nationwide that welcomed a group of Mandela Washington Fellows earlier this year. They were “eager to learn about how we do things,” executive director John Gardner explained.

Since shortly after its founding in 1984 by citizens concerned about the toll that a newly discovered disease was taking on their state, AIDS Delaware has attracted a committed group of volunteers to spread the prevention message. The nonprofit group makes it easy to volunteer by offering a simple online sign-up form.

Client confidentiality is a priority of AIDS Delaware, Gardner told the young African leaders. Confidentiality of personal medical information is protected by a U.S. law that also covers caregivers and people who pay for care.

AIDS Delaware encourages people of every race, sexuality and age to learn about how to prevent the spread of HIV. It helps people who are infected understand why they need to stay on a prescribed medication regime. And it attempts to get in contact with people who may not be getting the care they need so that they can gain access to care, Gardner said.


AIDS Delaware’s outreach activities include Do the Right Thing 4 Life, educational sessions that use everyday language and are held at community gathering places like beauty salons and barber shops. Through its Peers Achieving Change Together project, teens use dance, music and poetry pieces they have created to emphasize that they need to take “responsibility for improving their own lives

and the lives of those around them.”

AIDS Delaware receives financial support from the U.S. government and the state of Delaware and from individual, corporate and foundation donations. Those funds support client services like assistance for housing, food and transportation, and for counseling. Its annual AIDS Walk is a community highlight that brings in donations from people who back volunteers who walk through their neighborhoods to raise awareness of HIV prevention through testing.

“Take the first step today,” AIDS Delaware encourages.

Vaccines: 10 Things You Need to Know

- Vaccines effectively, efficiently and safely prevent disease.
- Widespread, consistent administration of vaccines has reduced diseases like diphtheria, mumps and measles as much as 99 percent.
- Full-scale distribution of the smallpox vaccine eradicated the disease in 1980.  Vaccines have dramatically reduced the occurrence of diseases that killed millions of young children in the past.
- The occurrence of polio has declined 99 percent since a global vaccination campaign began in 1988.
- An estimated 350,000 annual polio cases appeared worldwide in the 1980s. 2013 saw 416 cases. As 2014 ends, only 316 polio cases have appeared worldwide.
- Vaccines remove a major barrier to human development by helping people stay healthy. Immunized children are more likely to thrive, attend school and grow up to become healthy, productive adults.
- Vaccination protects a child’s cognitive skills, physical strength and school performance. Greater developmental success will contribute to an individual’s long-term productivity.
- Vaccines save time and money for health systems and families as the burdens of illness and long-term disability are reduced.
- Parents regain productive time and potential earnings when they are not caring for children stricken with infectious diseases.
- Families are relieved of the trials and expenses of caring for children with long-term disabilities that may result from infectious diseases.

Have you joined #HealthyUg yet? Take our quiz and learn more at yali.state.gov/health.


Sources: www.cdc.gov; www.gavi.org; www.polioeradication.org; www.unicef.org; www.who.int;

Communities Are Critical to Effective Disease Responses

“The most important role communities can play is to rapidly report and isolate infected patients so that the sick will not continue to infect their families and communities.”

— Saran Kaba Jones

The founder of a community development organization in Liberia — Saran Kaba Jones of [FACE Africa](#) — has mobilized community health efforts in response to the 2014 outbreak of the often-fatal infectious disease Ebola in West Africa.

Saran Kaba Jones, left, leads health  education campaigns with FACE Africa in Liberia.

Credit: Keiko Hiromi

More than 18,600 cases of the disease have caused almost 7,000 deaths in the region, according to early December data from international health monitors. As the year comes to a close, signs are emerging that the outbreak is in remission.

FACE Africa and Jones’ efforts have certainly made a contribution to the decline in cases noted in Liberia. In a Facebook chat with the YALI Network, Jones explained that she originally established FACE Africa five years ago to help improve access and awareness about safe water, sanitation and hygiene.

When Ebola presented itself as a more immediate crisis, Jones said FACE Africa redirected its efforts to the crisis of the moment.

“We leveraged our existing on-ground staff resources, extensive local knowledge and deep-rooted community trust to begin working on social mobilization, prevention and awareness programs, distribution of hygiene kits, and held public engagement activities to counter damaging rumor, fear and misunderstanding about the virus. While it was successful, we still need to continue our work to ensure zero new cases over a long period of time.”

With thousands of YALI Network members participating in the [December 16-18 Facebook chat](#),

Jones explained the top messages her group conveyed to the communities they work in:

- 1) What is Ebola and how is it transmitted?
- 2) How to recognize the signs and symptoms of Ebola.
- 3) What measures and precautions to take to avoid exposure to the disease.
- 4) How to deal with suspected cases of Ebola.

"The most important role communities can play [in combating disease] is to rapidly report and isolate infected patients so that the sick will not continue to infect their families and communities," Jones said.

FACE Africa is working to train about 750 volunteers in Ebola awareness and prevention procedures, an effort that has helped to expand local understanding of proper hygiene practices. That achievement should have value beyond this outbreak, Jones predicted, contributing to broader adoption of sanitation practices which can help prevent other common diseases and improve overall health.

The West African Ebola outbreak of 2014 is the largest to occur anywhere in the world, infecting more people than any other previous outbreak. Still, the experience of earlier outbreaks in other parts of Africa should prove instructional, Jones said. She points to successful efforts in recent years to control Ebola in the Democratic Republic of the Congo and Uganda. Local people — working quickly, responding properly — hold the key to overcoming Ebola and other health threats.

"It is the local doctors, nurses, community health workers, burials teams, local organizations, youth associations, women's groups, religious leaders and many volunteers, perhaps working alongside international partners, that will ultimately win this war," Jones told the YALI Network.

The Ebola outbreak has had ripple effects in West Africa beyond the health sector: Economics, education, agriculture and transportation have also been affected. Setbacks in these other sectors must also be corrected before a full recovery can be achieved.

"It is up to us as individuals — you, me and every single one of you on this YALICHAT. We can get involved and take action. We each have what it takes to transform our continent and build healthier, more resilient communities. Not only for ourselves but for our children and our children's children," Jones wrote on Facebook.

Part of aiding the recovery is getting the story straight, she said. International media coverage, rumour and exaggeration have all contributed to fear and hysteria about the outbreak. In turn, this ill-informed, frightened discourse has cast an unfavorable light on Africa in general, Jones said, and everybody has a role in setting that record straight.

"But what's missing from the narrative are the thousands of Ebola patients that have been successfully treated and discharged from treatment centers. As Africans, we need to tell these success stories."

The Facebook chat with Saran Kaba Jones of FACE Africa is available on Facebook:


[Questions on FACE Africa](#)

[Questions on community responses to Ebola](#)

[Questions on the effects of stigma](#)

Authoritative information on the status of the West African Ebola update is available at <http://www.cdc.gov/vhf/ebola/> and <http://www.who.int/csr/disease/ebola/situation-reports/en>.

Mobile Phone Towers: The Answer to Vaccine Availability

Solar panels at this Zimbabwe cell tower  generate excess energy to maintain a cold chain for vaccines. Photo courtesy: Energize the Chain

Vaccines are among the most effective ways of saving lives. A concerted campaign in recent years has vastly expanded the numbers of world children who receive vaccines. The Gavi Alliance estimates that vaccines have saved 6 million children who would have died from diseases that killed so many millions in centuries before.

Still, delivering vaccines to remote areas remains a persistent problem. Vaccines require what's called the "cold chain" — a means of transport and storage of vaccine that keeps the material between 2 and 8 degrees Celsius from manufacture to administration. Without that, vaccines become useless.

Thousands of volunteers over the decades have trudged down forest paths, forded streams and found remote villages to deliver vaccines in small coolers. A group called [Energize the Chain](#) (EtC) is finding a better way.

The lightning-fast adoption of mobile phones in the developing world has led to a booming crop of the towers that bounce the signal from caller-to-caller. The EtC team figured out that each phone tower generates more electricity than it needs, enough to sustain a refrigeration unit to store vaccines.

To tap that excess electricity, EtC installed 111 tower-driven refrigeration units to maintain "cold chain" conditions for vaccines headed to remote or rural areas. EtC made use of the newly created cold chain to insure that 250,000 Zimbabwean children, regardless of where they lived, received vaccines in 2013.

The EtC mission is to "eradicate vaccine-preventable deaths worldwide by making effective vaccines as accessible as global cell phone coverage." This method also reduces waste of vaccines and will "solve the missing link in the delivery of vaccines to the world's poorest," EtC pledges.

EtC plans to establish vaccine cold chains for Burundi, Lesotho, India and possibly other countries in the near future.
